

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

|                                  |   |
|----------------------------------|---|
| Application Type::               | Regular   |
| Subject Matter::                 | Utility   |
| Title::                          | OMNI-DIRECTIONAL OPTICAL CODE<br>READER USING SCHEIMPFLUG<br>OPTICS |
| Attorney Docket Number::         | 51306/757:1   |
| Request for Non-Publication?::   | No  |
| Request for Early Publication?:: | No  |
| Suggested Drawing Figure::       | 11  |
| Total Drawing Sheets::           | 13  |
| Small Entity::                   | No  |

### APPLICANT INFORMATION

|   |                   |
|---|-------------------|
| Applicant Authority Type::              | Inventor          |
| Primary Citizenship Country::           | US                |
| Status::                                | Full Capacity     |
| Given Name::                            | Alexander         |
| Middle Name::                           | M.                |
| Family Name::                           | McQueen           |
| City of Residence::                     | Eugene            |
| State or Province of Residence::        | OR                |
| Street of Mailing Address::             | 85269 Lorane Hwy. |
| City of Mailing Address::               | Eugene            |
| State or Province of Mailing Address::  | OR                |
| Postal or Zip Code of Mailing Address:: | 97405             |

**CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 33451  
Phone Number:: 503-224-3380  
Fax Number:: 503-220-2480  
E-Mail Address:: patlaw@stoel.com

**REPRESENTATIVE INFORMATION**

Representative Customer Number:: 33451

**DOMESTIC PRIORITY INFORMATION**

| <b>Application::</b> | <b>Continuity Type::</b> | <b>Parent Application::</b> | <b>Parent Filing Date::</b> |
|----------------------|--------------------------|-----------------------------|-----------------------------|
| This Application     | Continuation             | 09/884,975                  | 06/21/01                    |

**ASSIGNEE INFORMATION**

Assignee Name:: PSC Scanning, Inc.  
Street of Mailing Address:: 959 Terry Street  
City of Mailing Address:: Eugene  
State or Province of Mailing Address:: OR  
Postal or Zip Code of Mailing Address:: 97402-9120